

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>gh</i>		<i>3/29/12</i>
O.I.P.E. CLASSIFIER		<i>14</i>	<i>4/3</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>MB</i>	<i>70303</i>	<i>8-28</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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